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ABSTRACT

Forty-three adolescents (11-16 years of age) attending a health care program, Project Alternatives, for "street children" in Tegucigalpa, Honduras, drew randomly assigned pictures of either the ideal man or woman, engaged in some activity. These drawings were compared to samples from adolescents in various parts of the world to assess the global neurological and emotional functioning of Honduran children in relation to children of other geographical areas. Compared to a large sample of adolescents from all over the world, the current participants were significantly more likely to draw the ideal person smiling, missing a body part, working in a job, engaging in adult responsibilities, and with achievement imagery. Using Koppitz' (1984) scoring criteria, the current sample showed more emotional indicators and organic signs than U.S. students, but fewer organic signs than street children in Cali, Colombia. Contains 10 references. (Author/SR)

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Street Children Draw the Ideal Person

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Street Children Draw the Ideal Person

Abstract: Forty-three adolescents (11-16 years of age) attending a health care program, Project Alternatives, for "street children" in Tegucigalpa, Honduras, drew a picture of the ideal man or woman doing something. Compared to a large sample of adolescents from all over the world, the current participants were significantly more likely to draw the ideal person smiling, missing a body part, working in a job, engaging in adult responsibilities, and with achievement imagery. Using Koppitz' (1984) scoring criteria, the current sample showed more emotional indicators and organic signs than U. S. students, but fewer organic signs than street children in Cali, Colombia (Aptekar, 1988).

The purposes of the current study were several. First, it was the intention of the investigators to compare drawings of the ideal man or woman of adolescent street children from Project Alternatives in Tegucigalpa, Honduras with drawings of adolescent school children from various parts of the world, such as Mexico, Guatemala, the Netherlands, Iceland, Sri Lanka, India, and the U.S. in order to explore beliefs about gender roles, work, and social values. Second, the current investigators were interested in using Koppitz' (1984) scoring criteria of the Human Figure Drawings to assess the global neurological and emotional functioning of the current sample, and to compare these results with data collected by Lewis Aptekar (1988) on a similar sample of street children from Cali, Colombia. Last, the current investigators were interested in assessing levels of intellectual maturity according to Goodenough-Harris' (1963) scoring criteria.

METHOD

Participants

Project Alternatives is a health education and social services program that provides primary health care, nourishment from a feeding program, and recreational activities to street children in Tegucigalpa, Honduras. Service providers include physicians, nurses, psychologists, and social workers. Wright, Kaminsky, and Wittig (1993) reported demographic and health related data collected on 1023 children through baseline protocols completed by project case workers. A brief description of their findings follows.

Interviews and clinical assessments revealed that the majority of the children are native Tegucigalpians, but a substantial proportion are migrants from neighboring rural areas. Most of the children are considered to be children "in the streets" who work in the market by day and go home to their families at night. They come from large, economically disadvantaged families consisting of several siblings and separated parents or parents living in a state of unmarried cohabitation. For 78% of these children, relationships with family members are assessed as "good to excellent" by case workers. A much smaller proportion, approximately 9% , is considered abandoned by their families. These are children "of the streets," because they have no home to go to at the end of the day.

Almost all of the children work in the open-air market as vendors earning money for their families. Half of the children have never attended school, and the other half has received three or fewer years of formal education. A slight majority of the children can read or write at some level (Wright, Kaminsky, & Wittig, 1993)

Most of the children are assessed to have "good to excellent' mental health. Yet, one client in eight is thought to have "fair to poor" mental health; 28% are assessed as being in "fair to poor" physical health; and over one third is considered to have significant nutritional problems. Health problems are similar to those experienced by homeless street children in U.S. cities and include skin ailments, respiratory infections, trauma, and dental problems (Wright, Kaminsky, & Wittig, 1993).

Procedure and Data Analysis

For the purposes of the current study, forty-three of these adolescents (11-16 years of age) were asked to draw a picture of the ideal man or woman as part of a recreational activity.

The instructions were to draw a picture of the ideal person doing something and to write comments explaining the person's activity. Through random assignment, six boys were asked to draw the ideal woman, and 10 were asked to draw the ideal man; 11 girls were asked to draw the ideal man, and 16 were asked to draw the ideal woman.

Each drawing was scored in 11 categories, such as whether the ideal person was shown smiling, engaging in gender-stereotyped behavior, or participating in adult responsibilities, according to the procedure described by Stiles, Gibbons and Schnellmann (1987). In addition, drawings were scored according to Koppitz' (1984) Emotional Indicators and signs of organicity; and standard scores for intellectual maturity were computed according to the scoring criteria established by Goodenough-Harris (1963) . Chi squares were computed to assess differences among groups in characteristics on the drawings.

RESULTS

Most of the persons in the drawings were alone and depicted as working as produce vendors or professionals , such as architects, doctors, and lawyers. Often times, the persons were drawn doing housework and chores around the home. Nearly 80 percent of the drawings depicted a person smiling.

Compared to a large sample of adolescents attending schools all over the world, the current participants were significantly more likely to draw the ideal person smiling, χ^2 (1, N = 3044) = 4.9, $p < .05$; missing a body part, χ^2 (1, N= 3073) = 6.86, $p < .01$; working in a job, χ^2 (1, N = 3074) = 12.83, $p < .001$; engaging in adult responsibilities, χ^2 (1, N = 3073) = 19.73, $p < .0001$; and with achievement imagery, χ^2 (1, N = 2710) = 6.4, $p < .05$. These results are

presented in Table 1.

Table 1. Comparison of Drawings of the Ideal of Honduran Street Children and School Children from 10 Countries

Items	*Percentage of Drawings* Project Alternatives (n = 43)	10 Countries (n = 3032)
Achievement	15	6 *
Smiling	78	61 *
Adult Responsibility	83	48 ***
Working	56	30 ***
Missing Body Part	27	13 **

* $p < .05$, significantly different from Project Alternatives
** $p < .01$, significantly different from Project Alternatives
*** $p < .001$, significantly different from Project Alternatives

Organic Signs

The drawings of the current sample demonstrated significantly fewer organic signs than drawings from a similar sample of street children (Aptekar, 1988). For example, 60% of the Honduran street children's drawings had 0 or 1 sign, indicating no impairment; whereas, only 25% of the drawings from the street children of Cali demonstrated no impairment, χ^2 (1, N = 99) = 10.56, $p < .01$. In addition, only 30% of the current drawings had 3 or more organic signs, indicating possible impairment; whereas, 61% of Aptekar's sample had 3 or more signs, χ^2 (1, N = 99) = 8.76, $p < .01$. It should be noted, however, that the criteria for organic signs overlap with the Emotional Indicators. Thus, it is not possible to separate emotional problems from neurological indicators on the Human Figure Drawings. These results are presented in Table 2.

Table 2. Percentages of Drawings that Demonstrated Organic Signs

Number of Signs	Project Alternatives (n = 43)	Cali (Aptekar, 1988) (n = 56)
0 or 1 sign	60	25*
2 signs	10	14
3 or more signs	30	61*

*$p < .01$, significantly different from Project Alternatives' Sample

Emotional Indicators

There were no significant differences in Koppitz' (1984) Emotional Indicators between the two samples of street children. Forty to fifty percent of the drawings from both samples demonstrated 3 or more Emotional Indicators, which may indicate emotional problems or unsatisfactory interpersonal relationships. It should be noted that these signs may only represent "immediate emotional conditions" at the time of testing, rather than chronic patterns of responding (Koppitz, 1984).

Compared to samples of age-related school children from Argentina and the U.S. (Koppitz & Casullo, 1983), drawings from the current sample of street children indicated significantly more emotional signs of impulsivity , χ^2 (2, N = 337) = 28.04, $p < .001$. In addition, the current sample did not differ significantly from the U.S. school children in any other Emotional Category; however, drawings from both groups demonstrated significantly more emotional signs of insecurity , χ^2 (2, N = 337) = 10.24, $p < .01$, and anger, χ^2 (2, N = 337) = 12.18, $p < .01$, than the drawings from the Argentinean adolescents. These results are presented in Table 3.

Table 3. Percentages of HFDs that Demonstrated Emotional Indicators

Emotional Category	Project Alternatives (n = 43)	(Koppitz & Casullo, 1983) Argentinean Sample (n = 147)	US Sample (n = 147)
Impulsivity	44	10**	17**
Insecurity	28	12*	25
Anger	12	1*	11

*$p < .01$, significantly different from Project Alternatives' Sample
**$p < .001$, significantly different from Project Alternatives' Sample

Intellectual Maturity

The standard scores for Intellectual Maturity of the current sample ranged from 50 to 128, with a mean score of 85 (SD = 20), indicating a score at the 16 percentile compared to age-related school children from the U.S.

DISCUSSION

Consistent with drawings from a sample of adolescent school children living in Guatemala City (Gibbons, et al., 1990) and the suggestion that a commitment to work may be a universal value among adolescents (Offer, et al., 1988), the current sample most frequently drew the ideal person working. In most cases, the ideal person was depicted as a fruit and vegetable vendor. In addition, these market children were more likely to draw the ideal person engaging in adult responsibilities, such as cleaning, caring for children, and earning money, than samples of adolescent school children from all over the world. These findings are not surprising, because the vast majority of these adolescents work in the marketplace to earn money for their families.

The finding that the current sample most frequently drew the ideal person in the context of

achievement imagery is consistent with results from studies of similar samples of Latin American street children. Lusk (1992) and de Oliveira et al. (1992), for example, suggested that career aspirations and hope for a "good future" were similar among street children and adolescents from more conventional family settings.

Although previous studies have indicated that Latin American adolescents of a lower SES (Gibbons, et al., 1990) were less likely to draw the ideal person smiling, the current sample of street children contradicted this finding. It appears that these market children place a high value on a friendly countenance. Similar to Aptekar's (1988) description of the smaller children of his sample whose appearance proved more profitable than that of their older counterparts, the current sample of market children may benefit from appearing "cute and happy" to their customers.

It is interesting to note that the current sample was more likely to draw the ideal person missing a body part. This may be a reflection of impulsivity, as indicated by Koppitz' (1984) criteria, and a sense of unfamiliarity with a structured, school-like activity. In light of the high prevalence rates of skin disorders, trauma, and physical ailments within this sample, this finding may also represent concerns over physical health.

Compared to the standard scores of intellectual maturity of school children from the U.S., the mean score for the current sample was at the 16th percentile. While this finding is discouraging, it is not surprising considering the high illiteracy rates, low levels of education among these adolescents and their parents, and the high rates of malnutrition.

Aikman et al. (1992) found that assessing intellectual level with HFDs underestimated Full Scale IQ scores in a sample of child and adolescent psychiatric inpatients. The capacity of these market children to perform self-managed tasks and to demonstrate ingenuity and mastery of skills

in work and play in the streets suggests adequate cognitive development and resources, at the very least. Thus, this test may not accurately describe the abilities of the current sample of street children. Perhaps a test that measures social awareness, knowledge of natural environment, and the ability to initiate and complete complex tasks performed in daily life is more likely to illustrate the intellectual skills of these market children.

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